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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Dennis Colleran et al.

Art Unit :

3738

Serial No.: 10/724,121

Examiner:

Melanie Jo Hand

Filed

Confirmation No.:

9916

: December 1, 2003

Notice of Allowance Date:

Title

: TISSUE REPAIR SYSTEM

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed August 7, 2007, enclosed are a completed issue fee transmittal form PTOL-85b and a check for \$1770 for the required issue fee and publication fee, including ten (10) patent copies.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

11/7/07

Respectfully submitted,

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PART B - FEE(S) TRANSMITTAL

Mail Stop ISSUE FEE Complete and send this form, together with applicable fee(s), to: Mail Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571) 273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or 7590 08/07/2007 formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated JOEL R. PETROW Smith & Nephew, Inc. below. 1450 Brooks Road (Depositor's name) Memphis, TN 38116 (Signature) (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/724,121 12/01/2003 00167-432002 Dennis Colleran 9916 TITLE OF INVENTION: TISSUE REPAIR SYSTEM APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1440 \$300 \$1740 **EXAMINER** ART UNIT CLASS-SUBCLASS HAND, MELANIE JO 3761 606-072000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the CFR 1.363). 1. Fish & Richardson P.C.____ names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single] Change of correspondence address (or Change of Correspondence firm (having as a member a registered attorney or Address form PTO/SB/122) attached. agent) and the names of up to 2 registered patent The Address indication (or "Fee Address" Indication form attorneys or agents. If no name is listed, no name PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY) Smith & Nephew, Inc. Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): [X] Issue Fee A check in the amount of the fee(s) is enclosed. [X] Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. [X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to [X] Advance Order - # of Copies ___ Deposit Account Number 06-1050 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) [].a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7. []b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or; or the assignee or other party in interest as shown by the records of the United States Farent and Traighnark Office. (Authorized Signature) (Date) _ November 7, 2007

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Roberto J. Devoto

Typed or Printed Name